

kent parks summer resident camp at waskowitz

August 1 - 5, 2016

A week-long overnight camp for boys and girls
entering 5th, 6th or 7th grade in Fall 2016



make their summer memorable

Experience confidence-building and team-oriented activities coupled with the fun of hiking, campfires, singing songs, fun adventures and making new friends.



• **Core Principles:** For 37 years, our summer camp program has provided a safe environment that meets each camper's physical, emotional and developmental needs. Campers are provided with healthy meals, a place to sleep, and a safe place to call home for 5 days/4 nights. They will engage in positive interactions, work in teams, build communication skills, and make new friends. Opportunities that build confidence and promote mutual respect will help campers be creative, solve problems, step out as leaders, have fun, and feel successful. Campers will have the time of their lives as they develop these amazing life skills.

• **Activities:** Camp runs overnight beginning on Monday and ending on Friday. During this time campers engage in activities with their cabin, larger activity groups, table groups, and with the camp as a whole. These include hiking, swimming, crafts, singing, team-building exercises including low ropes courses, skits, dancing, meals, campfires, special guest, games, and camp-wide team challenges. These activities are designed to meet our core principles and build self-confidence in each camper.

• **Learn More:** Go to vimeo.com/50999126 to watch a recent award winning video of camp. At kentwa.gov/waskowitz.html you'll also find answers to common questions about camp. Two parent/camper information meetings are scheduled on June 8 and July 13 from 6:30–7:30 p.m. at Kent Commons to help answer your questions. This will give you and your camper a chance to meet the co-directors and several of the counselors and see a slide show of previous camps.

• **Location:** Camp Waskowitz is located at the base of Mt. Si, in the foothills of the Cascade Mountains, four miles east of North Bend. Campers meet at Hogan Park at Russell Road (24400 Russell Rd) parking lot at 8:15 a.m. Monday, Aug. 1, to board school buses to take them to camp. Return at 2 p.m. on Friday, August 5 at the same location.

• **Facilities:** Camp is nestled in the woods on 360 acres of land. Campers are housed in cabins that accommodate 12 people with individual beds and mattresses; cabins are supervised by two counselors each. A modern kitchen, lavatories with showers, and electric heat blend with the natural environment to provide comfortable living. A pool, fire tower, campfire area, and play fields are also available.

• **Meals:** Healthy meals are prepared for the campers and served family style in the dining hall. Dietary restrictions, including allergies, may be accommodated upon request.

• **Leadership/Supervision:** Miss Lisa and Mr. Cameron co-direct along with eight senior staff and 24 counselors. All counselors have experience in working successfully with children, participate in an extensive training weekend held prior to camp, and have passed background checks. Many counselors work in education and in leadership capacities. 80% of the counselors are returning.

• **Access to Recreation/Scholarships:** Kent Parks, Recreation and Community Services is dedicated to enriching lives. A goal within that mission is to ensure that every pre-school child and school-age youth residing within the City of Kent or Kent School District has full access to a wide variety of recreational opportunities regardless of family income or ability to pay. Applications for assistance are available at the Kent Commons. Residency and other restrictions apply – please call (253) 856-5030 for more information.

• **Fee:** The total cost is \$330, which includes transportation, cabin accommodations, supervision, all meals while at camp, supplies, and camp shirt.

• **How to Register:** A non-refundable/non-transferable \$25 deposit holds your child's spot. Complete the attached registration form and return it with your deposit. A detailed information letter will be sent to you in the middle of July. Full payment by July 18 is required to guarantee space.

• **What to Bring:** A good appetite and a friendly smile! A sack lunch to eat on the way to camp, a sleeping bag and small pillow, swim suit, enough warm clothing for 4 days (it gets chilly in the mountains at night), extra socks, underclothes, toothbrush, toothpaste, comb, shampoo, soap, washcloth, towel, pajamas, etc. Optional items: flashlight, camera, musical instrument. DO NOT BRING: cell phones, iPods, electronic play equipment, money, radios, candy, gum, or food of any kind. LABEL ALL OF YOUR BELONGINGS! Parents are also invited to attend camp on Thursday evening to watch the camp "skits and songs" night as well as meet your child's counselors and new friends and tour the facility.

City of Kent Parks, Recreation and Community Services Summer Resident Camp at Waskowitz 2016

(For youth entering 5th, 6th or 7th grade in the Fall of 2016)

Camper Name _____ Name Camper Goes By _____

Mother/Guardian Name _____ Father/Guardian Name _____

Address _____ City _____ ZIP _____

E-mail Address of Parent/Guardian: _____

Home Phone _____ Mother Work/Day Phone _____ Father Work/Day Phone _____

Birthdate ____/____/____ Age _____ School Attending _____ Grade (Fall 2016) _____ ☐ Boy ☐ Girl

Emergency Contact Other Than Parent: Name _____

Home Phone _____ Business Phone _____

Child's Physician _____ Phone Number _____

Child's Dentist _____ Phone Number _____

Medical Provider Name, Group # and Membership # _____

Date of last Physical _____ Date of last Tetanus Shot _____

Cabin mate request? _____ Length of time previously away from home: _____

Medical Information: Does your child have any **physical** or **emotional** concerns of which we should be aware?

Camper's Shirt Size: ____ CHILD ____ Small ____ Medium ____ Large ____ ADULT ____ Small ____ Medium ____ Large ____ XL

Ethnicity/Race: ☐ Asian ☐ Black or African American ☐ Hispanic or Latino ☐ White ☐ Native Hawaiian or other Pacific Islander ☐ American Indian or Alaska Native ☐ Other ☐ Two or More Races
(Optional) Please select one

Please Check if Appropriate: (Confidential)

- | | |
|---|----------------------------------|
| <input type="radio"/> Bedwetting | <input type="radio"/> Nightmares |
| <input type="radio"/> Sleepwalk/Talk | <input type="radio"/> Temper |
| <input type="radio"/> Moodiness | <input type="radio"/> Headaches |
| <input type="radio"/> Accident Prone | <input type="radio"/> Other |
| <input type="radio"/> Vegetarian | |
| <input type="radio"/> Food Allergies? _____ | |
| <input type="radio"/> Does your child have any fears? | |

Is your child taking any medications?

- ☐ No
- ☐ Yes (If yes, call 253-856-5030 for an "Authorization to Administer Medication" form).

Please list medication(s):

Can your child swim? (check one)

- ☐ No ☐ Beginner ☐ Intermediate ☐ Advanced

How did you hear about camp?:

Please complete form and return with fee and/or deposit to Kent Parks, Recreation and Community Services, Kent Commons, 525 4th Ave. N., Kent, WA 98032-4428

I assume all risks and hazards of the conduct of the program and release from responsibility any person providing transportation to and from activities. In case of injury, I do hereby release and hold harmless the City of Kent, its elected and appointed officials and employees, the organizers, sponsor, supervisor, or any volunteer connected with the program from any and all claims, injuries, damages, losses or suits, including attorney fees, arising out of or in connection with the program. In absence of signature, payment of fees and participation in the program shall constitute acceptance of the conditions set forth in the release. I grant full permission to use any photographs, videotapes, motion pictures, recordings, or any other record of this program for any City of Kent informational or promotional use.

Signature of Parent or Guardian

\$ _____	Fee (\$330) enclosed - Do not send cash
\$ _____	Deposit (Minimum \$25, non-refundable/non-transferable) Will pay balance ____/____/____ *
\$ _____	*Payment in full is required by 7/18/16
\$ _____	♥ Donation (Help support kids attending camp. Thank You!)
\$ _____	Technology Fee
\$ + \$1.00**	TOTAL

**Effective 2012, a \$1 technology fee is being applied to support systems that provide convenience and efficient service delivery.

CREDIT CARD: Exp. Date _____ VISA/Mastercard # _____

Name on Credit Card: _____

(boys) 57441
(girls) 57442

For Office Use Only

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"This camp was a boost in confidence and motivated my child to come out of his shell."

- Parent of Camper

**for more information,
please call 253.856.5030**



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KentWA.gov